09	8	12	4	7	1
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pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

RP 592 00 L000 7151

		CLAIMS A	S FILED -	PART	1		SM	ALL E	NTITY		OTHER	THAN
		(Column 1)		(Column 2)			TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS		55				F	TATE	FEE]	RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		BA	SIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		55. mir	55. minus 20=		35		(\$.9=		OR	X\$18=	.630	
INDEPENDENT CLAIMS			6 minus 3 =		3		3	(40=	·	OR	X80=	240
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					135=		OR	+270=	,
• If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2			OTAL		OR	TOTAL	1580	
7-	604 C	LAIMS AS A (Column 1)	MENDEC	- PAR (Colur		(Column 3)	SI	MALL	ENTITY	ΟÄ	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	a		EST BER DUSLY	PRESENT EXTRA	Γ	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 55	Minus	5	5	- \	×	\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	···· (2.	= \	×	(40=		OR	∴X80=	
	THOTTHEOL	SYLVIOLOGY WA	OÇTIF EE DEI	·	OCAIM		+1	135=		OR	+270=	
	,							TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		_(Colur	nn 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Z	Total	•	Minus	**		=	X	\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		-	X	40=	,"	OR	X80=	
	PIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDENI	CLAIM		+1	35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)	ر من					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	X	\$ 9=		OR	X\$18=	ï
	Independent	•	Minus	***		=	1 —	40=			X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM] -^	70=		OR	70V=	
**	If the "Highest Nu	mn 1 is less than them the street of the str	aid For IN THI	S SPACE IS	s less that	n 20. enter "20.		35= TOTAL T. FEE		OR OR	+270= TOTAL ADDIT: FEE	
-20	ir the "Highest Nur The "Highest Num	mber Previously Pa ber Previously Pa	aid For" IN THI id For" (Total o	S SPACE I Independe	s less tha ent) is the	n 3, enter "3." highest numbe			ropriate box			